Effective October 1, 2003													7
CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN (Column 1) (Column 2) TYPE OR SMALL ENTITY													
TOTAL CLAIMS			13					RATE		FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	EE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			\		* 0			X\$ 9:	=		OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =					X43= .			OR	X86=	
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT					+145=			OR	+290=	
* if	the difference	in column 1 is	ess than zero, enter "0" in column 2			1	TOTA	₩	3/2	OR	TOTAL		
CLAIMS AS AMENDED - PART II									. <u>.</u>			OTHER	
(	1/2/07	(Column 1)		(Column 2) (Column 3)			SMAL	LE	NTITY	OR	SMALL		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		PLATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MOM	Total	M)	Minus	00 Zl	2	= 0		X\$ 9=			OR	X\$18=	
AME	Independent	. 2	riin <b>us</b>	044 S		<u> 0</u>		X48=			OR	X86=	
لــا	FIRST PREMENTATION OF MULTIPLE DEPE				CLAIM			+145=			OR	+290=	
	06.6	•		-			Į.	TOTA			OR	TOTAL ADDIT, FEE	·
	91/401	(Column 1)		(Colum	nn 2) (	Column 3)	•	ADDII. FE			)	ADDII. FEET	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	EST BER JUSLY	PRESENT EXTRA		RATE		ADDI- FEE	1	RATE	ADDI- TIONAL FEE
NON	Total	. 15	'nu <b>s</b>	40 Zl	2.	- 6		X\$ 9=			OR	X\$18=	
AME	Independ 1	NTATION OF MU	inus	ENDENT		<u>- 6</u>		X43=			OR	X86=	
ل	THOTPIN	INATION OF INC	CITI CE DEI	LINDEIN	OD AIM			+145=			OR	+290=	
1								TOTA			OR	TOTAL ADDIT, FEE	
(Column 1) (Column 2) (Column 3)													
AMENDMENT C	`	CLAMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE		ADDI- TONAL FEE		RATE	ADDI- TIONAL FEE
<b>202</b>	Total	•	'nu <b>s</b>	<del>trù</del>	-	=		X\$ 9=			OR	X\$18=	
ME	Independ :		'nu <b>s</b>	<del>aaa</del>		3		X43=	╁			X86≖	
PINST PRESENTATION OF MULTIPLE DEPENDENT CLAIM													
• 11	the ntry in colur	nn 1 is less than th	entry in colu	mn 2, write	"0" in colur	nn 3.		+145=	<u> </u>		OR	+290=	
0001	fthe "Highest this fthe "Highest t	nber Previously Pa nber Previously Pa	d For IN THIS	S SPACE is S SPACE is	less than tess than	20, enter <b>"20.</b> " 3, enter <b>"3."</b>		DOIT. FE	EL	السيسي		ADDIT. FEE	
****If the "Highest I have previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest New per Previously Paid For" (Total or Indep Indent) is the highest number found in the appropriate box in column 1.													

Application or Docket Number